

RECEIVED
CENTRAL FAX CENTER
NOV 30 2006

I hereby certify that this correspondence is being
facsimile transmitted to the United States Patent
and Trademark Office on November 30, 2006.


Jean Kyle, Patent Attorney

Examining Group 1753
Patent Application
Docket No. AME-T114
Serial No. 10/694,453

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Examiner : Rodney Glenn McDonald
Art Unit : 1753
Applicant : Gorokhovsky
Serial No. : 10/694,453
Filed : October 27, 2003
For: Filtered Cathodic Arc Deposition Method and Apparatus

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PETITION AND FEE FOR EXTENSION OF TIME
UNDER 37 CFR 1.136(a)

Sir:

Applicant requests that the period for response be extended three months through and including November 30, 2006. Please charge Deposit Account 50-3760 the fee of \$510.00 (small entity). A Response Under 37 CFR 1.111 accompanies this Petition.

Any additional fees as required by 37 CFR 1.17 should be charged to Deposit Account No. 50-3760.

Respectfully submitted,


Jean Kyle
Patent Attorney
Registration No. 36,987
Phone No.: (406) 375-1317
Address : P.O. Box 2274
Hamilton, MT 59840-4274

12/01/2006 FMETEK11 00000096 503760 10694453
01 FC:2253 510.00 DA

PTO/SB/17 (07-08)

Approved for use through 01/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2006 (H.R. 4818).**FEE TRANSMITTAL**
For FY 2006 Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

850.00

Complete if Known

Application Number	10/694,453
Filing Date	October 27, 2003
First Named Inventor	Gorokhovsky
Examiner Name	R.G. McDonald
Art Unit	1763
Attorney Docket No.	AME-T114

RECEIVED
CENTRAL FAX CENTER
NOV 30 2006**METHOD OF PAYMENT** (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 50-3760				Deposit Account Name: Jean Kyle, P.C.
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17		<input checked="" type="checkbox"/> Credit any overpayments		

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEES CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		<u>Fees Paid (\$)</u>
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 (including Reissues)

Small Entity

Fee (\$)

Fee (\$)

50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

Total Claims**Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 20 or HP = 26 x 25 = 650

HP = highest number of total claims paid for, if greater than 20.

Multiple Dependent Claims**Fee (\$)** **Fee Paid (\$)****Indep. Claims** **Extra Claims** **Fee (\$)** **Fee Paid (\$)**

- 3 or HP = 2 x 100 = 200

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets **Extra Sheets** **Number of each additional 50 or fraction thereof** **Fee (\$)** **Fee Paid (\$)**

- 100 = / 50 = (round up to a whole number) x =

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Fees Paid (\$)

Other (e.g., late filing surcharge):

SUBMITTED BY

Signature:

Name (Print/Type): Jean Kyle

Registration No.
(Attorney/Agent) 36,987

Telephone 406-375-1317

Date 11-30-2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.